

Application

Roanoke County / Town of Vinton - Community Development

Phone: 540-772-2065

TYPE OF WORK (circle)	
New construction	Alteration
Addition	Demolition
CATEGORY OF CONSTRUCTION	
Building primary use:	
Building secondary use:	
Accessory structure: (describe)	
Other: (describe)	
SCOPE OF WORK (Describe briefly, but thoroughly)	
JOB SITE INFORMATION	
Primary Job Address:	
Secondary Job Address:	
City/State/ZIP:	
Suite #:	
Development: (mall, strip, apts)	
Tax map/parcel #:	Zoning:
PROPERTY OWNER	
Name:	
Mailing address:	
City/State/ZIP:	
Phone #: ()	Cell #: ()
APPLICANT (if other than owner)	
Business name:	
Applicant name:	
Address:	
City/State/ZIP:	
Phone #: ()	Fax #: ()
Cell #: ()	E-mail:
State License #:	
Expiration Date:	County License #:

[illegible]**CERTIFICATION:**

I hereby certify that I am the owner of record of the herein described property, or that the proposed work has been authorized by the owner of record and that I have been authorized to make this application as a designated agent. I agree to conform to all applicable state and local regulations, rules and policies and such shall be deemed a condition entering into the exercise of the permit. In addition, if a permit is issued, I certify that the code official or his authorized representative shall have the authority to enter the area(s) described herein at any reasonable hour for the purpose of enforcing the provisions of the applicable code(s).

OWNERS AFFIDAVIT: (complete if applicant is not a licensed contractor)

I affirm that I am the owner of the property described in this application and that I am familiar with the prerequisites of Section 54.1-111 of the Code of Virginia, as amended, and I am not subject to licensure as a contractor or subcontractor. I am also aware that it is a violation of State Law to hire or award a contract to an unlicensed contractor.

SIGNED: (MUST BE NOTARIZED IF OWNER DOES NOT PRESENT IN PERSON)

Subscribed and sworn before me in the _____ of _____, this _____ day of _____, 20____.

My commission expires _____ Notary Public _____